Case Reports in *Monaldi:* eleven years so far and a continuing commitment

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It was eleven years ago that I have began my collaboration with the *Monaldi Archives for Chest Disease* and both the recent changes in its Editorial Board, and the massive number of case reports appearing in the current journal's issue [1-6], are prompting me to try to draw up a balance of the past years and to address the impact of the case reports on the future years of the journal.

As Section Editor, and subsequently as Associate Editor in the past eleven years, I have dealt with 122 case reports submitted to the Monaldi. The majority of these papers (64.52% of the total) were submitted from outside Italy. For all papers, with a few exceptions, I have asked for the opinion of at least one external reviewer. Seventy six papers were accepted for publication, which means a rejection rate of 38%. A few of the papers we had the opportunity to review, were of outstanding value, most were quite good, some were either fair or poor. The main reason for rejection was the lack of an educational target, because of major problems in the description of the diagnostic flow chart presented by the author(s). In any case, we appreciated the efforts made by the writers, even in rejected papers. Authoritative reviews were included in the rejection letter, to help the authors to improve the paper, in case of a submission elsewhere.

Case reports are seldom published by major international respiratory journals, and a requisite required for publication in these journals is the relative uniqueness of the report. This is of course understandable, because of the high impact of these journals, which devote more room to basic and clinical original articles, including large series of patients. Nevertheless, the daily clinical practice gives us the opportunity to deal with cases which combine the infrequency with a hard commitment in diagnostic, assessment, and therapeutic procedures. Nowadays physicians are surrounded by flow-charts and guidelines, and such cases not fulfilling the usual tracks are an ideal tool for keeping the physicians' mind trained. We guess that a target for the Monaldi's future would be to devote more room for descriptions of these case reports [7]. Monaldi was rebuilt eleven years ago with a strong educational feature and thus focusing on case reports with these peculiarities is one strategy that allows the journal to keep its educational promises.

Besides the issue of jogging the reader's mind, writing a case report is also an useful gymnasium for young physicians, under the supervision of expert mentors. Case reports very often open the list of publications in many physicians and scientists' *CVs*. To devote room in a journal for case reports is also a way to stimulate physicians in training to contest scientific writing.

The *Monaldi* invitation to its readers and contributors is to keep an eye open on their wards, to select clinical cases that could be suitable for a report, and to write a paper. For our part, we will try to ensure fast and authoritative reviews, and to select papers which will be published primarily based on their educational merit. This is the journal's Editorial Board's commitment for the future.

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